## PART B - FEE(S) TRANSMITTAL

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APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/743,599	10/743,599 12/22/2003		Robert W. Olsen		P-11	209.06	7548
		<b>,</b>	CORPOREAL BLOOD CI				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TO	TAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	07/02/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS				
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1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1.363).							lano
_ ´	ondence address (or Cha 3/122) attached.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 Jeffrey J. Hohenshell					
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	ication (or "Fee Address 2 or more recent) attach	" Indication form ned. Use of a Customer	registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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PLEASE NOTE: Unl	less an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the part of the part o	atent. If an assigned	is identifi	ed below, the d	ocument has been filed for
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Medtronic, Inc. Minneapolis, MN							
Please check the appropr	iate assignee category or	categories (will not be p	rinted on the patent):	Individual 🗴 Cor	poration or	other private gro	oup entity Government
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4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  Issue Fee  Publication Fee (No small entity discount permitted)  Description:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.							
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			overpayment, to Depos	sit Account Number	<u>13-254</u>	6 (enclose a	n extra copy of this form).
	tus (from status indicate s SMALL ENTITY state	•	☐ h Applicant is no lone	ger claiming SMALI	FNTITY	status See 37 Cl	FR 1 27(a)(2)
NOTE: The Issue Fee an	d Publication Fee (if req	uired) will not be accepte	d from anyone other than the	_			
Authorized Signature	ALL O	ites Patent and Trademark	Conice.	Date Ma	v 2	25 . 20	107
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This collection of inform application. Confiden	ation is required by 37 C tiality is governed by 35	CFR 1.311. The information U.S.C. 122 and 37 CFR	on is required to obtain or r 1.14. This collection is est	etain a benefit by the imated to take 12 m	e public wh	ich is to file (and	by the USPTO to process g gathering, preparing, and

an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## P-11209.06

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## **ISSUE FEE TRANSMITTAL**

In September 2015 In 18 Application of: Robert W. Olsen et al.

For: ACTIVE AIR REMOVAL FROM AN EXTRACORPOREAL BLOOD CIRCUIT

**Serial No.: 10/743,599** Filed: 12-22-2003

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CERTIFICATE UNDER 37 CFR §1.8\_ I hereby certify that this ISSUE FEE TRANSMITTAL AND TRANSMITTAL and the paper(s), as described herein are being deposited with the United States Postal Service, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this day of May, 2007.

Signature

Jo L. Brecht

Printed Name

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Sir:

We are transmitting herewith the attached:

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- ⊠ Return Postcard
- ☑ Please charge Deposit Account 13-2546 \$1,400.00 Issue Fee, and \$300 Publication Fee for a Total of \$1,700.00.
- Applicant believes that no extension of time is required. However, if an extension of time is required, please consider this a petition therefor to provide for the possibility that applicant has inadvertently overlooked the need for an extension of time and charge same to Deposit Account 13-2546.
- Please charge any additional fees or credits to Deposit Account No. 13-2546 which may have been overlooked on this Transmittal with regard to this filing.

May 2007

Date

Atty Jeffrey J Hohenshel

Reg. No. 34,109

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